PTO/SB/96 (04-07)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Danger, Inc. Application No./Patent No.: 10/718,956 Filed/Issue Date: November 21, 2003 Entitled: DATA PROCESSING DEVICE HAVING MULTIPLE ADJUSTABLE DISPLAY AND KEYBOARD ORIENTATIONS , a Corporation Danger, Inc. (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. 7 the assignee of the entire right, title, and interest; or an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is in the patent application/patent identified above by virtue of either: A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 015186 , Frame 0950 , or for which a copy thereof is attached. B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows: The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_ , or for which a copy thereof is attached. The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached. 3. From: The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_\_, Frame \_\_\_\_\_\_, or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. INOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.081 The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. / Dave Morasch 42905 / Feb.25, 2009 Signature Date David A. Morasch 509-755-7262 Printed or Typed Name Telephone Number Attorney

This collection of Information is required by 37 CFR 3.73(s). The information is required to obtain or retain a benefit by the public which is 0.5is (sed by the USPTO or process) an application. Conformatility is proved by 55 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering preparing, and automiting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete in file man and/or suppleasions for reducting life burden, though the sent to the Clinic Individual case. Any U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrial, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrial, VA. 22313-1450.

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## I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: Practitioners associated with the Customer Number: 69316 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Registration Number Name Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: 69316 The address associated with Customer Number. OR Firm or Individual Name Address Ctato City Country Telephone Email Assignee Name and Address: A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTC/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual phose signature and title is supplied below is authorized to act on behalf of the assignee

This discless of information is equired by 17 CPR 1.31, 1.32 por 1.33. The information is required to obtain or retain a benefit by the public which is to the lend by the USPT On processip an appealable. Condentinality is equired by 3 to 18.2 and 31 CPR 1.11 and 11.4. This collection is estimated to the 28 minutes are provided by 18.2 and 19.2 and 19.2

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Name

Benjamin O. Orndorft